

City of Newton
Office of Human Resources

Change of Name, Address, or Telephone Number

Name Change

Reason for name change: (Copy of new Social Security Card is required)

Married (attach copy of Marriage Certificate): _____

Social Security No.: _____ - _____ - _____

Employee's old name:

First Middle Last

Employee's new name:

First Middle Last

Address and/or Telephone Number Change

Employee's Name:

First Middle Last

Social Security No.: _____ - _____ - _____

Employee's New Address:

Street Apt #

City State Zip Code

Employee's New Phone Number (include area code): _____

Emergency Contact:

Name Primary Phone Secondary Phone

For Office Of Human Resources Only

Date/Init Entered Pent. Date/Int. Date/Init. Change Label